Division f Corporatio

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

**Enter the email address for this business entity to be used for future

Email Address:

FLORIDA LIMITED LIABILITY CO.

annual report mailings. Enter only one email address please. **

ymp real estate management, llc

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Certified Copy	0
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Corporate Filing Menu

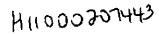
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https://efile.sunbiz.org/scripts/efilcovr.exe

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EMPIRE CORP KIT



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:

YMP REAL ESTATE MANAGEMENT, LLC

(Must and with the words "Limited Liability Company, "L.L.C.," or "LL.C.")

ARTICL	и п	- 44	Trace.

The mailing address and street address of the principal office of the Limited Liebility Company is:

Principal Office Address:

Mailing Address:

2413 Fisher Island Drive

Miami Beach, FL 33109

2413 Fisher Island Drive Miami Beach, FL 33109

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limited You must designate an individual or smother business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Moshe Popack

Nana

2413 Fisher Island Drive

Florida street address (P.O. Box NOT acceptable)

Miami Beach

_{FL}33109

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited llability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am fumiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Monib	or	
MGRM	Moshe Papack	
	2413 Fisher Island Orlva	
	Miami Beach, FL 33109	
(Use attachment if necessary)		
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